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PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032
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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))

Attorney Docket No. 3493.00125

First Inventor Zhimei Jiang

Title Channel Efficiency Based Packet Scheduling For Interactive Data In Cellular Networks

Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification (Total Pages 24)
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross References to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) (Total Sheets 11)
5. Oath or Declaration (Total Pages 4)
 - a. ☒ Newly executed (original or copy)
 - b. ☐ Copy from a prior application (37 CFR 1.63 (d))
(for a continuation/divisional with Box 18 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATIONS PARTS

9. ☒ Assignment Papers (cover sheet & document(s))
10. ☐ 37 C.F.R. §3.73(b) Statement ☐ Power of Attorney
(when there is an assignee)
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s)
(if foreign priority is claimed)
16. ☐ Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. ☐ Other: _____

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☐ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No: _____ / _____

Prior application information: Examiner _____

Group / Art Unit: _____

For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

17. CORRESPONDENCE ADDRESS

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Name

Address

City

State

Zip Code

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Telephone

Fax

Name (Print/Type)

Thomas H. Jackson

Registration No. (Attorney/Agent)

29,808

Signature

Thomas H. Jackson

Date

February 16, 2001

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

FEE TRANSMITTAL

for FY 2001


Patent fees are subject to annual revision.

Complete if Known

Application Number	TBA
Filing Date	Herewith
First Named Inventor	Zhimei Jiang
Examiner Name	TBA
Group / Art Unit	TBA
Attorney Docket No.	3493.00125

TOTAL AMOUNT OF PAYMENT	(\$)	858
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METHOD OF PAYMENT (check one)					FEE CALCULATION (continued)					
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:					3. ADDITIONAL FEES					
Deposit Account Number	19-0733				Fee Code	Large Entity Fee (\$)	Fee Code	Small Entity Fee (\$)	Fee Description	Fee Paid
Deposit Account Name	Banner & Witcoff, LTD				105	130	205	65	Surcharge - late filing fee or oath	
<input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					127	50	227	25	Surcharge - late provisional filing fee or cover sheet.	
2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other					139	130	139	130	Non-English specification	
FEE CALCULATION					147	2,520	147	2,520	For filing a request for reexamination	
1. BASIC FILING FEE					112	920*	112	920*	Requesting publication of SIR prior to Examiner action	
Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description						
101	710	201	355	Utility filing fee						
106	320	206	160	Design filing fee						
107	490	207	245	Plant filing fee						
108	710	208	355	Reissue filing fee						
114	150	214	75	Provisional filing fee						
SUBTOTAL (1)										(\$ 710)
2. EXTRA CLAIM FEES										
Total Claims	26	-20	=	Extra Claims	6	X	Fee from below	18	=	108
Independent Claims	2	-3	=	Extra Claims	0	X	Fee from below		=	0
Multiple Dependent				Extra Claims		X	Fee from below		=	0
Large Entity Fee Code	Entity Fee (\$)	Small Entity Fee Code	Entity Fee (\$)	Fee Description						
103	18	203	9	Claims in excess of 20						
102	80	202	40	Independent claims in excess of 3						
104	270	204	135	Multiple dependent claim, if not paid						
109	80	209	40	** Reissue independent claims over original patent						
110	18	210	9	** Reissue claims in excess of 20 and over original patent						
SUBTOTAL (2)										(\$ 108)
Other fee (specify) _____										
**or number previously paid, if greater; For Reissues, see above										
SUBTOTAL (3)										(\$ 40)

SUBMITTED BY				Complete (if applicable)	
Name (Print/Type)	Thomas H. Jackson	Registration No. Attorney/Agent)	29,808	Telephone	(202) 508-9119
Signature				Date	February 16, 2001

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